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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing	Attorney Docket Number	003-16
	First Named Inventor	Yevgeniy Kuklin, et al
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named Inventor, I hereby declare that:

My residence post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"METHOD AND APPARATUS FOR SKIN TREATMENT USING NEAR INFRARED LASER RADIATION"

(Title of the Invention)

the specification of which

☐ Is attached hereto
OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, Sect 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto

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PTO/SB/01 (8-96)
Approved for use through 9/30/98. OMB 0651-0032.

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute the application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
James E. Brunton, Esquire	24,321		

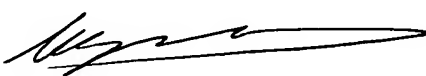
☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	James E. Brunton, Esquire		
Address			
Address	Post Office Box 29000		
City	Glendale	State	California
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Country	the United States	Telephone	(818) 956-7154
Fax	(818) 549-8477		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon

Name Of Sole Or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Yevgeniy	Middle initial	Family Name
			Kuklin
			suffix e.g. Jr.

Inventors Signature		Date	06/20/03
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Residence: City	Woodland Hills	State	CA	Country	the United States	Citizenship	Russia
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City	Woodland Hills	State	CA	Zip	91364	Country	the United States
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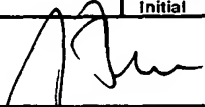
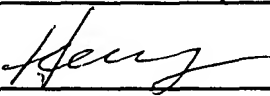
☐ Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION										ADDITIONAL INVENTOR(S) Suppl mental Sheet	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Antoine			Middle Initial		Family Name	Garabet			suffix e.g. Jr.	
Inventor's Signature							Date	7-10-03			
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Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Nikolay			Middle Initial		Family Name	Ivanov			suffix e.g. Jr.	
Inventor's signature							Date	10/20/03			
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City	Irkutsk 664074			State		Zip		Country	Russia		
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	n/a			Middle Initial		Family Name				suffix e.g. Jr.	
Inventor's Signature							Date				
Residence: City				State		Country				Citizenship	
Post Office Address											
Post Office Address											
City				State		Zip		Country			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name				Middle Initial		Family Name				suffix e.g. Jr.	
Inventor's Signature							Date				
Residence: City				State		Country				Citizenship	
Post Office Address											
Post Office Address											
City				State		Zip		Country			

☐ Additional inventors are being named on supplemental sheet(s) attached hereto